BEST AVAILABLE COPY

ITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. DOX 1450 Alexandria, Vinginia 22313-1450 www.unplu.gov

APPLICATION NUMBER

JUN 2 7 2005

FILING OR 371 (c) DATE

FIRST NAMED APPLICANT

ATTORNEY DOCKET NUMBER 01681/1/US

10/626,166

07/23/2003

Gregory E. Amidon

CONFIRMATION NO. 9717

FORMALITIES LETTER

OC000000015949826

PHARMACIA CORPORATION **Global Patent Department** 5th Floor, Mail Zone 1006 575 Maryville Centre Drive St. Louis, MO 63141

MAY 0 9 2005 PHARMACIA DAL PATENT DEPT. Ji Louis, Mo

Date Mailed: 05/05/2005

MAY 1 2 2005

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL

06/28/2005 HLE333

00000019 161445 10626166

01 FC:1051

130.00 DA

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below. however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing. A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required. Note: If a petition under 37 CFR 1.47 is being filed, an oath or declaration in compliance with 37 CFR 1.63 signed by all available joint inventors, or if no inventor is available by a party with sufficient proprietary interest, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(f) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

The applicant needs to satisfy supplemental fees problems indicated below.

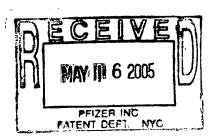
The required item(s) identified below must be timely submitted to avoid abandonment:

 Additional claim fees of \$360 as a non-small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is \$490 for a Large Entity

- \$130 Late oath or declaration Surcharge.
- Total additional claim fee(s) for this application is \$360



■ \$360 for multiple dependent claim surcharge.

Replies should be mailed to: Mail Stop Missing Parts

Commissioner for Patents

P.O. Box 1450

Alexandria VA 22313-1450

A copy of this notice <u>MUST</u> be returned with the reply.

Office of Initial Patent Examination (703) 308-1202
PART 2 - COPY TO BE RETURNED WITH RESPONSE

JUN 2 7 2005 15

Patent Application Attorney Docket No. PC28053

Mereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: "BOX MISSING PARTS", Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this 24th day of June 2005.

Ву		
•	(Signature of person mailing)	
	Andrea E. Dorigo	
	Reg. No. 47,532	
	(Typed or printed name of person)	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Amidon et al.

APPLICATION NO.:

10/626,166

Group Art Unit: 1615

FILING DATE: July 24, 2003

TITLE: SUSTAINED-RELEASE TABLET

COMPOSTION OF PRAMIPEXOLE

BOX MISSING PARTS

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

RESPONSE TO NOTICE OF MISSING PARTS

Enclosed herewith are Declaration(s) and Power of Attorney(s) for the above-identified application.

The Commissioner hereby authorized to charge the appropriate fee and any additional fees required under 37 C.F.R. §§ 1.16 and 1.17, or to credit any overpayment to Deposit Account No. 16-1445. Two copies of this paper are enclosed.

A copy of the Notice to File Missing Parts is also enclosed.

Respectfully submitted,

Date: June 24, 2005

Andrea E. Dorigo

Attorney for Applicant(s)

Reg. No. 47,532

Pfizer, Inc Patent Department, 5th Floor 150 East 42nd Street New York, NY 10017-5612 (212) 733-1898

Complete if Known Effective on 12/08/2004 es pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818) 10/626,166 **Application Number** FEE TRANSMITTAL 07/23/2003 Filing Date **Gregory Everett Amidon** First Named Inventor for FY 2005 Examiner Name 1615 ☐ Applicant claims small status. See 37 CFR 1.27 Art Unit PC28053 Attorney Docket No. **Total Amount of Payment** METHOD OF PAYMENT (check all that apply) Other (please identify):_ ☐ None Money Order ☐ Check Credit Card Deposit Account Name___ Pfizer Inc Deposit Account: Deposit Account number_ 16-1445 For the above identified deposit account, the Director is authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee to ○ Charge fee(s) indicated below. the above-identified deposit account. \boxtimes Credit any overpayments Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.1.6 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038 FEE CALCULATION 1. BASIC FILING FEE **EXAMINATION FEES SEARCH FEES FILING FEES Small Entity** Small Entity **Small Entity** Fees paid Fee (\$) Fee (\$) Fee (\$) **Application Type** Fee (\$) Fee (\$) 200 100 250 500 150 Utility 300 65 130 50 100 100 200 Design 80 160 150 300 100 200 Plant 300 600 500 250 300 150 Reissue 0 100 0 Provisional 200 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description 25 50 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues) 180 360 Multiple dependent claims Multiple Dependent Claims Fee Paid (\$) **Total Claims** Fee (\$) Extra Claims Fee (\$) Fee(\$) - 20 or HP= HP= highest number of total claims paid for, if greater than 20 Fee Paid (\$) Indep. Claims **Extra Claims** Fee (\$) - 3 or HP= HP= highest number of total claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) **Extra Sheets** Fee (\$) **Total Sheets** Fees Paid (\$) (round **up** to a whole number) Fee (\$) - 100= 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 130.00 Other: Late Filing Surcharge Submitted (212) 573-1898 Registration No. Telephone Andrea E Name (Printed/Type) (Attorney Agent)

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and /or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.